



### Monthly Pension Contribution for Public and Private Sector Employees

Expected Employee monthly Contribution

[illegible]**Voluntary Contribution (Formal Sector, Informal Sector, & Cross-Border Employees), Micro Pension Contributor**

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* Title	* Surname	* First Name	Middle Name

[illegible]**NOK's Correspondence Address**

*Location	Nigeria	Abroad
	<input type="checkbox"/>	<input type="checkbox"/>

[illegible][illegible]

\*\* NOK State Code                      NOK ZIP Code                      \* Mobile Number (*Country Code + Mobile No*)

* NOK Country Code	P.O. Box or PMB(if any)
<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>

[illegible]

### APPLICANT BIOMETRICS/CERTIFICATION

**\* CUSTOMER CONSENT AND AUTHORIZATION FOR ACCESS TO NATIONAL IDENTITY NUMBER (NIN) INFORMATION**

I .....  
(Surname Name Middle)

hereby certify that the information provided in this form is correct. I further consent and authorize National Identity Management Commission to release my NIN information (as may be required) to the National Pension Commission (PenCom), upon request by my Pension Fund Administrator, for the maintenance and operation of my Retirement Savings Account. It is my understanding that PenCom shall exercise due care to ensure that my information is secure and protected

## NIGERIA DATA PROTECTION REGULATION DATA CONSENT FORM

\*Recent passport  
(with a white background)

**Name should be boldly written  
at the back of the passport  
photograph**

**\*\* Signature**

Date.....

**FOR OFFICIAL USE ONLY**

Does the applicant have any Physical Challenge? ☐ Yes ☐ No

\* If yes: Tick Type Partial ☐ Complete/Others ☐

## PENSION OPERATOR CERTIFICATION

I hereby certify that the information given above is correct to the best of my knowledge This form was administered by;

A horizontal number line starting at 0 and ending at 20. There are tick marks for every integer from 0 to 20. Below the line, there are boxes for the numbers 1 through 19. The boxes are arranged in two rows: the first row contains boxes for 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, and 19. The boxes are empty.

Surname

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First Name

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Agent Code	Designation

Agent Location \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**Attach copies of the following relevant document to the PFA**

- Official ID (Staff ID with any one of the following National ID, Drivers Licence or Permanent Voters (PVC) International Passport)
- Letter of first appointment/Attestation Letter/Gazette (Public Sector Employees and Letter of Appointment (Private Sector))
- Birth certificate or declaration of age

I hereby grant **IEI-Anchor Pension Managers Limited** and all its third-party processors authority to process my personal data, for the purpose of:

1. Opening an account
2. Processing my pension benefits
3. Receiving newsletters, e-mails, promotions and marketing materials
4. Rectification of my data
5. Research and statistical purpose

I am aware this is necessary for **IEI-Anchor Pension Managers Limited** legitimate interests to process personal information for the purpose of processing my request.

I consent to **IEI-Anchor Pension Managers Limited** using my personal data for the purposes described in this notice and understand that I can withdraw my consent at any time using the Data Subject Consent Withdrawal Form.

**Name of Individual providing Consent:**

Address of Individual providing Consent:

Signature: \_\_\_\_\_ Date \_\_\_\_\_

**DATA PROTECTION OFFICER ENDORSEMENT**

Name::

Designation : \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Location